Fill in this information to identify your case:			
United States Bankruptcy Court for the:			
WESTERN DISTRICT OF NEW YORK	_		
Case number (if known)	_ Chapter you are filing under:		
	■ Chapter 7		
	☐ Chapter 11		
	☐ Chapter 12		
	☐ Chapter 13	☐ Check if the amended	

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

02/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Michael First name C Middle name	First name Middle name
identification to y	Bring your picture identification to your meeting with the trustee.	Storm Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-0133	

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):			
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)			
		EIN	EIN			
5.	Where you live	19 Beckwith Road	If Debtor 2 lives at a different address:			
		Pine City, NY 14871 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code			
		Chemung	Humber, Street, Oity, State & Zir Gode			
		County	County			
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.			
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code			
6.	Why you are choosing this district to file for	Check one:	Check one:			
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.			
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)			

7	The chanter of the	Charl	k one / [= 1	riof docerintian -	of analy and Mating Pagering of his	11 C C & 2/12/h) for Individuals Filing for De	nkrunto		
7.	The chapter of the Bankruptcy Code you are choosing to file under	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	choosing to the under	■ Chapter 7							
		☐ Chapter 11							
		☐ Ch	napter 12						
		☐ Cł	napter 13						
8.	How you will pay the fee	•	about how yo	ou may pay. Typic attorney is subm	cally, if you are paying the fee yo	k with the clerk's office in your local court for nourself, you may pay with cash, cashier's checalf, your attorney may pay with a credit card or	k, or money		
					Illments. If you choose this option (Official Form 103A).	on, sign and attach the Application for Individu	als to Pay		
			I request the but is not req applies to yo	at my fee be waiv uired to, waive yo ur family size and	ved (You may request this option our fee, and may do so only if you I you are unable to pay the fee in	n only if you are filing for Chapter 7. By law, a ur income is less than 150% of the official pov n installments). If you choose this option, you r cial Form 103B) and file it with your petition.	erty line that		
					napio, i i imigrato variota (emi	yan rom roos, and mon wan you polition.			
9.	Have you filed for bankruptcy within the	■ No							
	last 8 years?	☐ Ye			VA/In a ra	Casa www.han			
			District District		When When	Cana mumahan			
			District		When	Case number			
			District		Wien				
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	■ No							
			Debtor			Relationship to you			
			District		When	Case number, if known			
			Debtor			Relationship to you			
			District		When	Case number, if known			
11.	Do you rent your residence?	□ No	. Go to l	ine 12.					
	residence?	■ Ye	s. Has yo	our landlord obtain	ned an eviction judgment agains	t you?			
				No. Go to line 12	2.				
				Yes. Fill out <i>Initi</i> bankruptcy petit		Judgment Against You (Form 101A) and file it	with this		

Case number (if known)

Debtor 1 Michael C Storm

12.	Are you a sole proprietor of any full- or part-time business?	full- or part-time No.		Part 4.	
		☐ Yes.	Nam	e and location of busi	ness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Nam	e of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Num	ber, Street, City, State	e & ZIP Code
	it to this petition.		Chec	ck the appropriate box	to describe your business:
				Health Care Busine	ess (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real I	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as de	fined in 11 U.S.C. § 101(53A))
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))
				None of the above	
Pari	debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D).	in 11 U.S ■ No. □ No. □ Yes. □ Yes.	I am Code I am I do r I am I cho	not filing under Chapter 1 e. filing under Chapter 1 e. filing under Chapter 1 not choose to proceed filing under Chapter 1 ose to proceed under	er 11. 1, but I am NOT a small business debtor according to the definition in the Bankruptcy 1, I am a small business debtor according to the definition in the Bankruptcy Code, and under Subchapter V of Chapter 11. 1, I am a small business debtor according to the definition in the Bankruptcy Code, and Subchapter V of Chapter 11. Property That Needs Immediate Attention
14.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?	
	public health or safety? Or do you own any property that needs immediate attention?			diate attention is , why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where	is the property?	
	3				Number, Street, City, State & Zip Code

Case number (if known)

Debtor 1 Michael C Storm

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	otor 1 Michael C Storm			Case numb	Der (if known)				
Par	t 6: Answer These Quest	ons for Re	porting Purposes						
16.	What kind of debts do you have?		individual primarily for a p	consumer debts? Consumer debts are de ersonal, family, or household purpose."	fined in 11 U.S.C. § 101(8) as "incurred by an				
			☐ No. Go to line 16b.						
			Yes. Go to line 17.						
		16b.	Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.						
			☐ No. Go to line 16c.						
			☐ Yes. Go to line 17.						
		16c.	State the type of debts yo	u owe that are not consumer debts or busine	ess debts				
	Are you filing under Chapter 7?	□ No.	I am not filing under Chap	oter 7. Go to line 18.					
	Do you estimate that after any exempt property is excluded and	■ Yes.	I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?						
	administrative expenses		■ No						
	are paid that funds will be available for distribution to unsecured creditors?		□ Yes						
18.	How many Creditors do	1 -49		□ 1,000-5,000	□ 25,001-50,000				
	you estimate that you owe?	☐ 50-99		☐ 5001-10,000	□ 50,001-100,000				
	owe?	☐ 100-19	9	□ 10,001-25,000	☐ More than100,000				
		□ 200-99	9						
19.	How much do you ■ \$0		0.000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion				
	estimate your assets to be worth?		1 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion				
			01 - \$500,000	□ \$50,000,001 - \$100 million	□ \$10,000,000,001 - \$50 billion				
		□ \$500,0	01 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion				
20.	How much do you	\$0 - \$5	0,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion				
	estimate your liabilities to be?	□ \$50,00	01 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion				
			01 - \$500,000	□ \$50,000,001 - \$100 million	□ \$10,000,000,001 - \$50 billion				
		□ \$500,0	01 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion				
Par	T7: Sign Below								
For	you	I have exa	mined this petition, and I	declare under penalty of perjury that the info	rmation provided is true and correct.				
				er 7, I am aware that I may proceed, if eligible e relief available under each chapter, and I o					
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).							
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.							
		bankruptc and 3571.	y case can result in fines u	ent, concealing property, or obtaining money up to \$250,000, or imprisonment for up to 20	or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519,				
		Michael	nel C Storm C Storm of Debtor 1	Signature of Debt	or 2				
		Executed	on March 9, 2020	Executed on					
			MM / DD / YYYY	M	M / DD / YYYY				

Debtor 1	Michael C Storm		Case number (if known)	
For your a	ttorney, if you are	I, the attorney for the debtor(s) named in this petitio	·	· ,

represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Mark A. Weiermiller, Esq. Signature of Attorney for Debtor	Date	March 9, 2020 MM / DD / YYYY
Mark A. Weiermiller, Esq.		
Cooper, Pautz, Weiermiller & Daubner, LLP		
2854 Westinghouse Road Horseheads, NY 14845		
Number, Street, City, State & ZIP Code Contact phone 607-739-8763	Email address	mweiermiller@cpwdlaw.com
- State Bar#321-65-0987 NY		

Filli	in this information to identify your case:			
Deb	**			
Dob	First Name Middle Name Last Name tor 2			
	use if, filing) First Name Middle Name Last Name			
Unite	ed States Bankruptcy Court for the: WESTERN DISTRICT OF NEW YORK			
Case	e number			
(if kno	own)		_	if this is an led filing
			amone	ica illing
∩ff	icial Form 106Sum			
	mmary of Your Assets and Liabilities and Certain Statistical Info	rmation	1	2/15
infor	s complete and accurate as possible. If two married people are filing together, both are equally remation. Fill out all of your schedules first; then complete the information on this form. If you are original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page. 1: Summarize Your Assets			
			Your as	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B		\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B		\$	8,433.40
	1c. Copy line 63, Total of all property on Schedule A/B		\$	8,433.40
Part	2: Summarize Your Liabilities			
			Your lia	abilities you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of S	Schedule D	\$	1,490.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F		\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F		\$	41,685.95
	Valueta	otal liabilities	Ф.	42.475.05
	Tour to	nai nabilities	Ψ	43,175.95
Part	3: Summarize Your Income and Expenses			
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I		\$	3,063.13
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J		\$	3,063.00
Part	4: Answer These Questions for Administrative and Statistical Records			
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the	e court with you	ır other sch	edules.
7.	■ Yes What kind of debt do you have?			
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 15		a personal,	family, or

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

page 1 of 2

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$______\$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

				_	
Fill in this infor	mation to identify yo	ur case and this filing:			
Debtor 1	Michael C Stor	m Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
		: WESTERN DISTRICT OF			
	. ,				
Case number				☐ Check if this i amended filin	
					J
Official Fo	orm 106A/B				
Schedu	le A/B: Pro	perty		12/15	
think it fits best. I information. If mo Answer every que	Be as complete and according space is needed, atta stion.	urate as possible. If two married	nce. If an asset fits in more than one category, I people are filing together, both are equally re in the top of any additional pages, write you have or Have an Interest In	esponsible for supplying correct	-
1. Do you own or	have any legal or equita	ble interest in any residence, b	uilding, land, or similar property?		
■ No. Go to Pa	ırt 2.				
☐ Yes. Where	is the property?				
Part 2: Describe	Your Vehicles				
Do vou own, lea	se, or have legal or e	quitable interest in any vehi	icles, whether they are registered or not	? Include any vehicles you own tha	at
			e G: Executory Contracts and Unexpired Le		
3. Cars, vans, t	rucks, tractors, sport	utility vehicles, motorcycles	S		
■ No					
☐ Yes					
			al vehicles, other vehicles, and accessories, snowmobiles, motorcycle accessories	ies	
■ No					
☐ Yes					
			tries from Part 2, including any entries fo		00
Part 3: Describe	Your Personal and Ho	usehold Items			
Do you own or	have any legal or equ	uitable interest in any of the	following items?	Current value of th portion you own? Do not deduct secu claims or exemptior	ıred
	oods and furnishings ajor appliances, furnitu	s ire, linens, china, kitchenware			
Yes. Desc	cribe				
	end tab	les, table and chairs, mid	fa, lamps, LR chair, coffee table, crowave, pots and pans and		
	dishwa	re n: 19 Beckwith Road. Pir	ne City, NY 14871	\$3,00	00.00

Official Form 106A/B Schedule A/B: Property page 1

Debtor 1	Michael C Storm	Case number (if known)
7. Electr Exam		quipment; computers, printers, scanners; music collections; electronic devices
□ No ■ Ye	es. Describe	
_ 10	TV	
	Location: 19 Beckwith Road, Pine	City NY 14871 \$200.00
	other collections, memorabilia, collectibles	books, pictures, or other art objects; stamp, coin, or baseball card collections;
■ Ye	es. Describe	
	Misc. books and family pictures Location: 19 Beckwith Road, Pine	City NY 14871 \$150.00
Exam □ No	musical instruments	nt; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools;
	Bows and arrows	
	Location: 19 Beckwith Road, Pine	City NY 14871 \$100.00
	Golf clubs Location: 19 Beckwith Road, Pine	City NY 14871 \$100.00
□ No	mples: Pistols, rifles, shotguns, ammunition, and related equipn	nent
	Rifle; shotgun Location: 19 Beckwith Road, Pine	City NY 14871 \$200.00
□ No	mples: Everyday clothes, furs, leather coats, designer wear, she	pes, accessories
	Misc. clothing, shoes and accessor Location: 19 Beckwith Road, Pine	
□ No	mples: Everyday jewelry, costume jewelry, engagement rings, v	edding rings, heirloom jewelry, watches, gems, gold, silver
	Watch Location: 19 Beckwith Road, Pine	City NY 14871 \$100.00

13. **Non-farm animals** *Examples:* Dogs, cats, birds, horses

☐ No

Debtor 1	Michael C S	torm			Case number (if known)	
Yes.	Describe					
			cats and 2 dogs			
		Locati	ion: 19 Beckwith	Road, Pine City NY 14871		\$500.00
□ No	ther personal ar		-	not already list, including any health a	ids you did not list	
			man riding lawn	mower Road, Pine City NY 14871		\$200.00
		Locali	on. 19 beckwilli	Noau, Fille City NT 14071		
		-		Part 3, including any entries for pages y	ou have attached	\$4,850.00
Part 4: De	escribe Your Finar	ncial Asset	s			
Do you ov	wn or have any	legal or e	quitable interest in	any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
□ No				ome, in a safe deposit box, and on hand v	vhen you file your petition	n
					Cash	\$100.00
□ No		. If you ha	ve multiple accounts	counts; certificates of deposit; shares in cress with the same institution, list each. Institution name:	edit unions, brokerage ho	
		17.1.	Checking	Visions FCU		\$203.40
		17.2.	Savings	Visions FCU		\$5.00
		17.3.	Checking	Visions FCU		\$1,500.00
			cly traded stocks ent accounts with bro	okerage firms, money market accounts		
■ No □ Yes.			Institution or issuer	name:		
•	ublicly traded soventure	tock and	interests in incorp	orated and unincorporated businesses	s, including an interest	in an LLC, partnership, and
■ No □ Yes.	Give specific in		about them me of entity:		% of ownership:	
Negot	tiable instruments	s include p	personal checks, cas	otiable and non-negotiable instruments shiers' checks, promissory notes, and mo ansfer to someone by signing or delivering	ney orders.	

Official Form 106A/B Schedule A/B: Property page 3

Debtor 1	Michael C Storm			Case number (if known)	
☐ Ye	s. Give specific information about Issuer na				
	•	eogh, 401(k), 403(b), thrift savings accounts, or other pe	ension or profit-sharing pla	ns
	s. List each account separately. Type of acc	ount:	Institution name:		
You Exa	mples: Agreements with landlords		at you may continue service or use fro lic utilities (electric, gas, water), telec		s, or others
□ No ■ Ye	S		Institution name or individual:		
0	Rental de	posit	Ronald Vandermark-Landlo	rd	\$1,275.00
	- Nontai de		- Nonaid Vandermark Editato		Ψ1,210.00
23. Annı ■ No		yment of money to	o you, either for life or for a number of	f years)	
	s Issuer name and	description.			
26 U.	S.C. §§ 530(b)(1), 529A(b), and 5		ified ABLE program, or under a qua	alified state tuition progr	am.
■ No □ Ye		and description. S	eparately file the records of any interes	ests.11 U.S.C. § 521(c):	
25. Trus	ts, equitable or future interests	in property (othe	r than anything listed in line 1), and	d rights or powers exerci	sable for your benefit
■ No □ Ye	s. Give specific information about	them			•
	•		other intellectual property from royalties and licensing agreemen	nts	
☐ Ye	s. Give specific information about	them			
Exa	, , ,		tive association holdings, liquor licen	ses, professional licenses	
■ No □ Ye	s. Give specific information about	them			
Money o	or property owed to you?				Current value of the
·					portion you own? Do not deduct secured claims or exemptions.
28. Tax ı □ No	refunds owed to you				
		them, including w	hether you already filed the returns ar	nd the tax years	
		Estimated 0	000 ! ((
		(prorate	020 income tax refunds ed)	Federal and NYS	\$500.00
Exal ■ No	•	ony, spousal supp	oort, child support, maintenance, divor	rce settlement, property se	ttlement
	benefits; unpaid loans you		s, disability benefits, sick pay, vacation e else	n pay, workers' compensa	ntion, Social Security

Schedule A/B: Property

Official Form 106A/B

D	ebtor 1	Michael C Storm	Case number (if known)	
	☐ Yes.	Give specific information		
31.		ts in insurance policies oles: Health, disability, or life insurance; health savings account (HS.	A); credit, homeowner's, or renter's insurar	nce
	No			
	☐ Yes.	Name the insurance company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
32.	If you a	erest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurne has died.	rance policy, or are currently entitled to rec	eive property because
		Give specific information		
33.		against third parties, whether or not you have filed a lawsuit o oles: Accidents, employment disputes, insurance claims, or rights to		
	_	Describe each claim		
34.	■ No	contingent and unliquidated claims of every nature, including c	ounterclaims of the debtor and rights to	set off claims
		Describe each claim		
35.	. Any fin ■ No	ancial assets you did not already list		
	☐ Yes.	Give specific information		
36		he dollar value of all of your entries from Part 4, including any out to the that number here		\$3,583.40
Pa	art 5: Des	scribe Any Business-Related Property You Own or Have an Interest In. I	List any real estate in Part 1.	
	Do you o	own or have any legal or equitable interest in any business-related prop	erty?	
		so to line 38.		
Pa		scribe Any Farm- and Commercial Fishing-Related Property You Own or or have an interest in farmland, list it in Part 1.	r Have an Interest In.	
46		own or have any legal or equitable interest in any farm- or con	nmercial fishing-related property?	
	■ No.	Go to Part 7.		
	☐ Yes.	. Go to line 47.		
Pa	art 7:	Describe All Property You Own or Have an Interest in That You Did No	ot List Above	
53.	Examp	have other property of any kind you did not already list? les: Season tickets, country club membership		
	■ No □ Yes.	Give specific information		
54	1. Add t	he dollar value of all of your entries from Part 7. Write that num	ber here	\$0.00
-				Ψ0.00

Debtor 1 Michael C Storm		Case number (if known)	
Part 8: List the Totals of Each Part of this Form			
55. Part 1: Total real estate, line 2			\$0.00
56. Part 2: Total vehicles, line 5	\$0.00		
57. Part 3: Total personal and household items, line 15	\$4,850.00		
58. Part 4: Total financial assets, line 36	\$3,583.40		
59. Part 5: Total business-related property, line 45	\$0.00		
60. Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61. Part 7: Total other property not listed, line 54 +	\$0.00		
62. Total personal property. Add lines 56 through 61	\$8,433.40	Copy personal property total	\$8,433.40
63. Total of all property on Schedule A/B. Add line 55 + line 62			\$8,433.40

Fil	l in this inform	ation to identify your ca	ase:			
De	ebtor 1	Michael C Storm				
Da	htor O	First Name	Middle Name	L	ast Name	
	ebtor 2 ouse if, filing)	First Name	Middle Name	L	ast Name	
Un	nited States Ban	kruptcy Court for the:	WESTERN DISTRICT OF N	EW Y	ORK (
Ca	se number	-				
_	(nown)					☐ Check if this is an amended filing
Oi	fficial For	m 106C				
			perty You Cla	im	as Exempt	4/19
the nee cas	property you liseded, fill out and enumber (if known to the number (if known to the number)	ted on Schedule A/B: Production attach to this page as mown).	operty (Official Form 106A/B) any copies of <i>Part 2: Additior</i>	as yo nal Pa	our source, list the property that you age as necessary. On the top of any	additional pages, write your name and
spe any fun exe	ecific dollar am applicable stands ds—may be ur emption to a pa	ount as exempt. Alternatutory limit. Some exem Nimited in dollar amour	atively, you may claim the f nptions—such as those for It. However, if you claim an	ull fa heal exen	th aids, rights to receive certain b nption of 100% of fair market valu	ing exempted up to the amount of enefits, and tax-exempt retirement
Pa	rt 1: Identify	the Property You Clair	n as Exempt			
1.	Which set of	exemptions are you cla	iming? Check one only, ever	n if yc	our spouse is filing with you.	
	☐ You are cla	iming state and federal n	onbankruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
	You are cla	iming federal exemptions	s. 11 U.S.C. § 522(b)(2)			
2			- ,,,,	mnt.	fill in the information below.	
	Brief description	on of the property and line	on Current value of the		ount of the exemption you claim	Specific laws that allow exemption
	Schedule A/B t	hat lists this property	portion you own Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	,	ers, nightstands, sof	a, \$3.000.00	_	\$3,000.00	11 U.S.C. § 522(d)(3)
t I (tables, table pots and pa		ave,		100% of fair market value, up to any applicable statutory limit	
	TV) Beakwith Bood Din	\$200.00		\$200.00	11 U.S.C. § 522(d)(3)
	City NY 148				100% of fair market value, up to any applicable statutory limit	
		and family pictures Beckwith Road, Pin	\$150.00		\$150.00	11 U.S.C. § 522(d)(3)
	City NY 148	71			100% of fair market value, up to any applicable statutory limit	
	Golf clubs		\$100.00		\$100.00	11 U.S.C. § 522(d)(5)

City NY 14871

Line from Schedule A/B: 9.2

 \square 100% of fair market value, up to

any applicable statutory limit

Location: 19 Beckwith Road, Pine

Debtor 1 Michael C Storm Case number (if known)

or 1 Michael C Storm			Case number (if known)	
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amou	int of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check	k only one box for each exemption.	
Rifle; shotgun Location: 19 Beckwith Road, Pine	\$200.00		\$200.00	11 U.S.C. § 522(d)(5)
City NY 14871			100% of fair market value, up to	
Line from Schedule A/B: 10.1		í	any applicable statutory limit	
Misc. clothing, shoes and accessories	\$300.00		\$300.00	11 U.S.C. § 522(d)(3)
Location: 19 Beckwith Road, Pine City NY 14871 Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit	
Watch	\$100.00		\$100.00	11 U.S.C. § 522(d)(4)
Location: 19 Beckwith Road, Pine City NY 14871 Line from Schedule A/B: 12.1	<u>.</u>		100% of fair market value, up to any applicable statutory limit	
3 pet cats and 2 dogs	\$500.00		\$500.00	11 U.S.C. § 522(d)(3)
Location: 19 Beckwith Road, Pine	\$500.00			
City NY 14871 Line from <i>Schedule A/B</i> : 13.1			100% of fair market value, up to any applicable statutory limit	
Craftsman riding lawn mower Location: 19 Beckwith Road, Pine	\$200.00		\$200.00	11 U.S.C. § 522(d)(5)
City NY 14871 Line from <i>Schedule A/B</i> : 14.1			100% of fair market value, up to any applicable statutory limit	
Cash	\$100.00		\$100.00	11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 16.1			100% of fair market value, up to any applicable statutory limit	
Checking: Visions FCU Line from Schedule A/B: 17.1	\$203.40	•	\$203.40	11 U.S.C. § 522(d)(5)
Elle Holli Genedale 74 B. TTT			100% of fair market value, up to any applicable statutory limit	
Savings: Visions FCU Line from Schedule A/B: 17.2	\$5.00		\$5.00	11 U.S.C. § 522(d)(5)
			100% of fair market value, up to any applicable statutory limit	
Checking: Visions FCU Line from Schedule A/B: 17.3	\$1,500.00		\$10.00	11 U.S.C. § 522(d)(5)
			100% of fair market value, up to any applicable statutory limit	
Rental deposit: Ronald Vandermark-Landlord	\$1,275.00	•	\$1,275.00	11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 22.1			100% of fair market value, up to any applicable statutory limit	
Federal and NYS: Estimated 2020 income tax refunds (prorated)	\$500.00	•	\$500.00	11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit	

Det	otor 1	Michael C Storm	Case number (if known)
3.	•	you claiming a homestead exemption of more than \$170,350? ject to adjustment on 4/01/22 and every 3 years after that for cases filed on c	or after the date of adjustment.)
		No	
		Yes. Did you acquire the property covered by the exemption within 1,215 day	ys before you filed this case?
		□ No	
		□ Yes	

FIII in this inform	nation to identify you	rease:						
Debtor 1	Michael C Storn							
Dahtan 0	First Name	Middle Name	Last Name					
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			-		
United States Bar	nkruptcy Court for the:	WESTERN DISTRICT OF NE	W YORK					
Case number								
(if known)							☐ Check	if this is an
							amend	ded filing
Official Form	1060							
		Mha Haya Claima	Coours	- d b C)			4044
<u>Schedule</u>	D: Creditors	Who Have Claims	Secure	ea by F	ropert	<u>у</u>		12/15
		If two married people are filing toget out, number the entries, and attach it						
•	have claims secured by	vour property?						
	-	his form to the court with your othe	r schedules.	You have n	othina else t	o repo	rt on this form.	
	all of the information	•						
		Delow.						
	I Secured Claims			. Colum	n A	Colu	mn B	Column C
		more than one secured claim, list the cr a particular claim, list the other credito		ely	nt of claim		e of collateral	Unsecured
		cal order according to the creditor's nar		Do not	deduct the	that	supports this	portion
2.1 Visions FO	CU	Describe the property that secures	the claim:		1,490.00	clain	\$1,500.00	If any \$0.00
Creditor's Name)	Checking: Visions FCU						·
24 McKinle	ον Ανο	As of the date you file, the claim is	: Check all that					
	NY 13760-5491	apply. Contingent						
	City, State & Zip Code	☐ Unliquidated						
rumber, ender,	ony, onato a 2.p oddo	Disputed						
Who owes the del	bt? Check one.	Nature of lien. Check all that apply.						
■ Debtor 1 only		☐ An agreement you made (such as	mortgage or s	secured				
Debtor 2 only		car loan)						
☐ Debtor 1 and De	btor 2 only	☐ Statutory lien (such as tax lien, me	echanic's lien)					
☐ At least one of th	☐ At least one of the debtors and another ☐ Judgment lien from a lawsuit							
☐ Check if this cla community del		Other (including a right to offset)	secured	credit car	d			
Date debt was incu	ırred <u>2017</u>	Last 4 digits of account nun	nber					
Add the dollar va	lue of your entries in C	olumn A on this page. Write that nun	nber here:		\$1,49	90.00		
If this is the last Write that number		the dollar value totals from all pages	5.		\$1,49	90.00		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Fill in this	s information to identify your	case.				
		case.				
Debtor 1	Michael C Storm First Name	Middle Name	Last Name			
Debtor 2	riisi Name	Middle Name	Last Name			
(Spouse if, fil	ing) First Name	Middle Name	Last Name			
United Sta	ates Bankruptcy Court for the:	WESTERN DISTRIC	T OF NEW YORK			
Case num	nher					
(if known)					_ c	heck if this is an
					aı	mended filing
O4:-:-1	E 400E/E					
	Form 106E/F					40/45
Sched	ule E/F: Creditors W	ho Have Unse	cured Claims			12/15
	the Continuation Page to this pag ase number (if known). List All of Your PRIORITY Un	•	ation to report in a Part	; do not file that Part. On th	ne top of any addit	ional pages, write your
1. Do any	y creditors have priority unsecure	d claims against you?				
■ No.	. Go to Part 2.					
☐ Yes	S.					
Part 2:	List All of Your NONPRIORIT	Y Unsecured Claims				
3. Do any	y creditors have nonpriority unsec	cured claims against you	?			
☐ No.	You have nothing to report in this p	art. Submit this form to the	court with your other so	hedules.		
Yes	5.					
unsecu	l of your nonpriority unsecured cl ured claim, list the creditor separately ne creditor holds a particular claim, i	for each claim. For each	claim listed, identify wha	t type of claim it is. Do not lis	t claims already incl	luded in Part 1. If more
2.						Total claim
4.1 A	rnot Medical Services PC	Last 4 di	gits of account numbe	r		\$901.20
No	onpriority Creditor's Name		_			***************************************
	00 Ivy Street	When wa	s the debt incurred?	7/23/15		
	Imira, NY 14905 umber Street City State Zip Code	As of the	date vou file, the clain	n is: Check all that apply		
	ho incurred the debt? Check one.		,			
	Debtor 1 only	☐ Contir	ngent			
	Debtor 2 only	☐ Unliqu	-			
	Debtor 1 and Debtor 2 only	☐ Dispu				
	At least one of the debtors and and	_ `	NONPRIORITY unsecur	ed claim:		
	Check if this claim is for a com	Пол	nt loans			
de	ebt	☐ Obliga		paration agreement or divorc	e that you did not	
	the claim subject to offset?		priority claims			
	No	☐ Debts		ring plans, and other similar	debts	
] Yes	Other	Specify Medical S	ervices		

Debt	or 1 Michael C Storm	Case number (if known)	
4.2	AT&T Mobility	Last 4 digits of account number	\$2,049.00
	Nonpriority Creditor's Name P.O. Box 636216	When was the debt incurred? 2016	
	Atlanta, GA 30353-6216		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	-	
	■ Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
	☐ Check if this claim is for a community debt		
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify cell phone charges	
4.3	Capital One	Last 4 digits of account number 5950	\$535.03
	Nonpriority Creditor's Name		
	P.O. Box 6492 Carol Stream, IL 60197	When was the debt incurred? 2019	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit card purchases	
4.4	Capital One	Last 4 digits of account number 4890	\$80.70
	Nonpriority Creditor's Name P.O. Box 6492	When was the debt incurred? 2019	
	Carol Stream, IL 60197		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	□ Debts to pension or profit-sharing plans, and other similar debts	
	□ Yes	■ Other. Specify Credit card purchases	
	— 163	Other, Specify Ordan data parollases	

1 Michael C Storm	Case number (if known)	
Charter Communications Nonpriority Creditor's Name	Last 4 digits of account number	\$331.50
400 Atlantic St. Stamford, CT 06901	When was the debt incurred? 2015	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that report as priority claims	you did not
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Dish Network	
Credit Acceptance Corp.	Last 4 digits of account number	\$6,995.13
Nonpriority Creditor's Name 25505 W. 12 Mile Road Southfield, MI 48034	When was the debt incurred? 9/30/19	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	 Obligations arising out of a separation agreement or divorce that report as priority claims 	you did not
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify judgment	
Credit One Bank	Last 4 digits of account number 3043	\$478.07
Nonpriority Creditor's Name P.O. Box 60500 City of Industry, CA 91716-0500	When was the debt incurred? 2019	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that report as priority claims	you did not
■ No	$\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts	
□Yes	■ Other. Specify Credit card debt	

Debt	Michael C Storm	Case number (if known)	
4.8	Empower Federal Credit Union Nonpriority Creditor's Name 1 Member Way Syracuse, NY 13212 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Boat loan deficiency	\$6,524.00
10	Empower Endoral Credit Union		\$4 046 00
4.9	Empower Federal Credit Union Nonpriority Creditor's Name 1 Member Way Syracuse, NY 13212 Number Street City State Zip Code Who incurred the debt? Check one.	When was the debt incurred? 2016 As of the date you file, the claim is: Check all that apply	\$1,016.00
	_		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit card purchases	
4.1	Guthrie Corning Hospital	Last 4 digits of account number	\$541.88
	Nonpriority Creditor's Name 1 Guthrie Drive	When was the debt incurred? 2014-2015	
	Corning, NY 14830-3696 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	\square Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Services	

Last 4 digits of account number	\$292.00
	
When was the debt incurred? 2019	
As of the date you file, the claim is: Check all that apply	
☐ Contingent	
☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans	
$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Debts to pension or profit-sharing plans, and other similar debts	
■ Other. Specify Credit card purchases	
Last 4 digits of account number	\$12,240.64
When was the debt incurred? 2011 and 2015	
As of the date you file, the claim is: Check all that apply	
☐ Contingent	
☐ Unliquidated	
☐ Disputed	
Type of NONPRIORITY unsecured claim:	
☐ Obligations arising out of a separation agreement or divorce that you did not	
■ Other. Specify 2011 and 2015 1040	
Local A digita of account number	\$483.35
When was the debt incurred? 2018	Ψ100.00
As of the date you file, the claim is: Check all that apply	
☐ Contingent	
☐ Unliquidated	
☐ Disputed	
Type of NONPRIORITY unsecured claim:	
☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Other. Specify credit card-Fingerhut	
	□ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit card purchases Last 4 digits of account number When was the debt incurred? 2011 and 2015 As of the date you file, the claim is: Check all that apply □ Contingent □ Unliquidated □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify 2011 and 2015 1040 Last 4 digits of account number When was the debt incurred? 2018 As of the date you file, the claim is: Check all that apply □ Contingent □ Unliquidated □ Disputed □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts

Michael C Storm	Case number (if known)	
Merrick Bank	Last 4 digits of account number 8390	\$643.5
Nonpriority Creditor's Name		******
P.O. Box 30537	When was the debt incurred? 2019	
Fampa, FL 33630-3537 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	, a si una una you ma, ma simini a cinosii aii ana appi,	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset? ■ No	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Credit card debt	
NYSEG	Last 4 digits of account number	\$1,397.0
Nonpriority Creditor's Name	<u> </u>	·
Attn: Bkpt. Dept. POB 5240	When was the debt incurred? 2015	
Binghamton, NY 13902-5240		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify utility bill	
Progressive Leasing Nonpriority Creditor's Name	Last 4 digits of account number	\$994.0
256 West Data Drive Draper, UT 84020	When was the debt incurred? 9/19	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not	
•	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
No		
Yes	■ Other. Specify furniture rental	

Debtor 1 Michael C Storm		Case number (if known)					
4.1	RR Resource Recovery LLC	Last 4 digits of account number	\$282.00				
	Nonpriority Creditor's Name 88 Tioga Ave. Suite 201	When was the debt incurred? 2015	<u>.</u>				
	Corning, NY 14830 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Other. Specify Medical services					
4.1	RR Resource Recovery LLC	Last 4 digits of account number	\$628.00				
	Nonpriority Creditor's Name 88 Tioga Ave. Suite 201	When was the debt incurred? 2015					
	Corning, NY 14830 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	■ Debtor 1 only	☐ Contingent					
	Debtor 2 only	□ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	□ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	Debts to pension or profit-sharing plans, and other similar debts					
	Yes	■ Other. Specify Medical services					
4.1	ServU FCU	Last 4 digits of account number	\$81.00				
	Nonpriority Creditor's Name 9823 Science Center Dr. Painted Post, NY 14870	When was the debt incurred? 2020					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not					
	Is the claim subject to offset?	report as priority claims					
	No	Debts to pension or profit-sharing plans, and other similar debts					
	Yes	■ Other. Specify Overdraft					

Michael C Storm	Case number (if known)	
Southport Dental	Last 4 digits of account number	\$1,049.40
Nonpriority Creditor's Name 1141 Broadway Elmira, NY 14904	When was the debt incurred? 2019	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Dental services	
St. Joseph's Hospital	Last 4 digits of account number	\$200.00
Nonpriority Creditor's Name 555 E. Market St. Elmira, NY 14901	When was the debt incurred? 2/10/19	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	\square Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	■ Other. Specify Medical Services	
Uown Leasing	Last 4 digits of account number	\$3,642.54
Nonpriority Creditor's Name 10500 University Center Drive	When was the debt incurred? 12/19	. ,
Tampa, FL 33612 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	, as a line date you me, and order to most an anat apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify furniture rental	

Debloi	Michael C Storm		Case number (if known)	
4.2	Uplift	Last 4 digits of account number	5978	\$300.00
	Nonpriority Creditor's Name 801 El Camino Real Menlo Park, CA 94025	When was the debt incurred?	2018	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify loan		
Part 3:				
is tryi have	his page only if you have others to be notified a ing to collect from you for a debt you owe to so more than one creditor for any of the debts tha ed for any debts in Parts 1 or 2, do not fill out o	omeone else, list the original creditor in t you listed in Parts 1 or 2, list the add	Parts 1 or 2, then list the collection agency	/ here. Similarly, if you
Name a	and Address	On which entry in Part 1 or Part 2 did you	ı list the original creditor?	
	• • • • • • • • • • • • • • • • • • •	Line <u>4.10</u> of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Clai	ms
	Tioga Avenue ng, NY 14830		Part 2: Creditors with Nonpriority Unsecured	Claims
•		Last 4 digits of account number		
	and Address	On which entry in Part 1 or Part 2 did you	_	
	nced Recovery Company Box 57547		Part 1: Creditors with Priority Unsecured Clai	
_	sonville, FL 32241	Last 4 digits of account number	Part 2: Creditors with Nonpriority Unsecured	Claims
Name a	and Address	On which entry in Part 1 or Part 2 did you	ı list the original creditor?	
	=	Line 4.12 of (Check one):	Part 1: Creditors with Priority Unsecured Clai	ms
_	Box 9056 anton, CA 94566		Part 2: Creditors with Nonpriority Unsecured	Claims
ricas		Last 4 digits of account number		
Name a	and Address	On which entry in Part 1 or Part 2 did you	list the original creditor?	
		Line <u>4.15</u> of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Clai	ms
	Box 15019 ny, NY 12212-5019		Part 2: Creditors with Nonpriority Unsecured	Claims
Albaii		Last 4 digits of account number		
Name a	and Address	On which entry in Part 1 or Part 2 did you	list the original creditor?	
		·	Part 1: Creditors with Priority Unsecured Clai	ms
	oadway, Room 1250 York, NY 10006		Part 2: Creditors with Nonpriority Unsecured	Claims
INEW		Last 4 digits of account number		
Name a	and Address	On which entry in Part 1 or Part 2 did you	ı list the original creditor?	
STHC			Part 1: Creditors with Priority Unsecured Clai	
	/. Water St. a, NY 14901		Part 2: Creditors with Nonpriority Unsecured	Claims
		Last 4 digits of account number		
	and Address	On which entry in Part 1 or Part 2 did you		
STHC 225 W	.C /. Water St.		Part 1: Creditors with Priority Unsecured Clai	
	a, NY 14901		Part 2: Creditors with Nonpriority Unsecured	Claims
		Last 4 digits of account number		
	and Address BE Group. Inc.	On which entry in Part 1 or Part 2 did you Line 4.5 of (<i>Check one</i>):	llist the original creditor? Part 1: Creditors with Priority Unsecured Clai	ms

Debtor 1 Michael C Storm	Case number (if known)					
P.O. Box 2594 Waterloo, IA 50704	■ Part 2: Creditors with Nonpriority Unsecured Claims					
	Last 4 digits of account number					
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?					
US Attorney's Office	Line <u>4.12</u> of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims					
100 State St., Room 6200 Rochester, NY 14614	■ Part 2: Creditors with Nonpriority Unsecured Claims					
	Last 4 digits of account number					

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 41,685.95
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 41,685.95

Fill in this information to identify your case:							
Debtor 1	Michael C Storm						
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the:		WESTERN DISTRICT O	OF NEW YORK				
Case number _						Check if this is an	
						amended filing	

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	n whom you have the or, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	=
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	_

Fill in this	information to identify your	case:			
Debtor 1	Michael C Storm				
.	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filir	ng) First Name	Middle Name	Last Name		
United Sta	tes Bankruptcy Court for the:	WESTERN DISTRICT (OF NEW YORK		
Officed Sta	tes bankruptcy court for the.	WEGTERNOIGH	SI IVEW FORK		
Case numb	ber				Chook if this is an
(ii kiiowii)					Check if this is an amended filing
					g
Official	l Form 106H				
Sched	lule H: Your Cod	ebtors			12/15
our name	nd number the entries in the and case number (if known you have any codebtors? (if	. Answer every question		. •	of any Additional Pages, write
1. 00	you have any codebiors: (ii	you are ming a joint case,	do not list ettilet spouse	as a codebiol.	
■ No □ Yes	3				
Arizon	hin the last 8 years, have you a, California, Idaho, Louisiana Go to line 3. s. Did your spouse, former spo	, Nevada, New Mexico, Pu	erto Rico, Texas, Wash		states and territories include
in line Form out Co	2 again as a codebtor only 106D), Schedule E/F (Officia olumn 2. Column 1: Your codebtor	if that person is a guaran I Form 106E/F), or Sched	tor or cosigner. Make	sure you have listed th 06G). Use Schedule D, S	with you. List the person shown e creditor on Schedule D (Official Schedule E/F, or Schedule G to fill ditor to whom you owe the debt
١	Name, Number, Street, City, State and Z	IP Code		Check all schedules	s that apply:
3.1				☐ Schedule D, line	•
	Name			□ Schedule E/F, li	ne
				☐ Schedule G, line	·
	Number Street City	State	ZIP Code	_	
3.2				☐ Schedule D, line	
	Name			☐ Schedule E/F, lii	
				☐ Schedule G, line	
-	Number Street			_	
	City	State	ZIP Code		

Fill	in this information to	identify your ca	ase:				I				
	btor 1	Michael C S									
	otor 2 ouse, if filing)										
Uni	ited States Bankrupto	cy Court for the	: WESTERN DISTRICT	OF NEW YORK							
	se number								ed filing ent showir	ng postpetition	
0	fficial Form	<u> 1061</u>					Ī	1M / DD/ Y	YYY		
S	chedule I: \	our Ince	ome								12/15
sup spo atta	plying correct infor use. If you are sepa ch a separate shee	mation. If you arated and you	sible. If two married peo are married and not filii r spouse is not filing wi On the top of any additi	ng jointly, and your ith you, do not inclu	spouse ide infor	is liv mati	ing with on abou	you, inclu your spo	ude infori ouse. If m	mation about ore space is	your needed,
1.	Fill in your emplo information.	yment		Debtor 1				Debtor 2	or non-f	iling spouse	
	If you have more than one job, attach a separate page with information about additional employers.	Employment status	■ Employed				☐ Employed				
		, ,	☐ Not employed				☐ Not e	mployed			
			Occupation	Service Advise	r						
	Include part-time, s self-employed work		Employer's name	Parmenter Inc.							
	Occupation may in or homemaker, if it		Employer's address	81 Old Ithaca R Horseheads, N		;					
			How long employed to	here? 3 mont	hs			_			
Pai	rt 2: Give Deta	ails About Mor	nthly Income								
spoo If yo	use unless you are so ou or your non-filing s	eparated. spouse have mo	ore than one employer, co	, c	·	Í			·	•	Ū
mor	e space, attach a sep	Jarate Sheet to	uns 101111.				For De	otor 1		ebtor 2 or ing spouse	
2.			ry, and commissions (becalculate what the month)		2.	\$	3	,935.73	\$	N/A	
3.	Estimate and list	monthly overt	ime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross li	ncome. Add lir	ne 2 + line 3.		4.	\$	3,9	35.73	\$	N/A	

Debtor 1		Michael C Storm	-		Case number (if known)							
					For	Debtor 1				otor 2 or ng spouse		
	Сор	y line 4 here	4		\$_	3,93	5.7	3	<u> </u>	N/A	<u>\</u>	
5.	List	all payroll deductions:										
	5a.	Tax, Medicare, and Social Security deductions	5	a.	\$	81	1.1	1 9	5	N/A	4	
	5b.	Mandatory contributions for retirement plans	5	b.	\$_		0.0	0 9	5	N/A	<u> </u>	
	5c.	Voluntary contributions for retirement plans		C.	\$_		0.0	<u> </u>	<u> </u>	N/A	_	
	5d.	Required repayments of retirement fund loans		d.	\$_		0.0	<u> </u>	§	N/A	_	
	5e.	Insurance		e.	\$_		1.4	<u> </u>	<u> </u>	N/A		
	5f.	Domestic support obligations	5		\$_		0.0	<u> </u>	§	N/A	_	
	5g. 5h.	Union dues Other deductions. Specify:		g. h.+	\$_ \$		0.0	0 + 3	·	N/A		
			_		· -			_			_	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6	•	\$ _	87	2.6	_	§	N/A	<u> </u>	
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7		\$ _	3,06	3.1	3		N/A	<u>\</u>	
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	0		¢		•					
	8b.	monthly net income. Interest and dividends		a. b.	\$_ \$		0.0	_	§	N/A		
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.		С.	\$_ \$		0.0	<u> </u>	·	N/ <i>i</i>	_	
	8d.	Unemployment compensation	8	d.	\$_		0.0	_	<u> </u>	N/A	_	
	8e.	Social Security	8	e.	\$		0.0	0	5	N/A	<u> </u>	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	_ 8:	f.	\$_	ı	0.0	o _	\$	N/A	<u>\</u>	
	8g.	Pension or retirement income	8	g.	\$_		0.0	•	<u> </u>	N/A		
	8h.	Other monthly income. Specify:	_ 8	h.+	\$_		0.0	0 + 9	§	N/A	1	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9		\$	ı	0.0	0	<u> </u>	N,	/ A	
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$		3,063.13	+	\$	N	/A = \$	3,	063.13
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule ade contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	dep			,		,	in <i>Sche</i>	<i>dule J</i> . I1. + \$		0.00
		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies							it	12. \$Comb		063.13

13. Do you expect an increase or decrease within the year after you file this form?

Yes. Explain:

monthly income

Fill in this information to identify your case:			
Debtor 1 Michael C Storm	Che	ck if this is:	
Daltas 0	_	An amended filing	
Debtor 2 (Spouse, if filing)		13 expenses as of	ving postpetition chapter the following date:
United States Bankruptcy Court for the: WESTERN DISTRICT OF NEW YORK		MM / DD / YYYY	
Case number			
(If known)			
Official Form 106J			
Schedule J: Your Expenses			12/15
Be as complete and accurate as possible. If two married people are filing together, information. If more space is needed, attach another sheet to this form. On the top number (if known). Answer every question.			
Part 1: Describe Your Household 1. Is this a joint case?			
■ No. Go to line 2. □ Yes. Does Debtor 2 live in a separate household?			
. □ No □ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses for Separate House</i>	sehold of Deb	otor 2.	
2. Do you have dependents? ■ No			
Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent Dependent's relative period of the period of		Dependent's age	Does dependent live with you?
Do not state the			□ No
dependents names.			☐ Yes ☐ No
			☐ Yes
		_	□ No
			☐ Yes
			□ No □ Yes
3. Do your expenses include ■ No		_	_ 100
expenses of people other than yourself and your dependents?			
Part 2: Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless you are using this expenses as of a date after the bankruptcy is filed. If this is a supplemental <i>Schedu</i> applicable date.			
Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on <i>Schedule I: Your Income</i>		V	
(Official Form 106l.)		Your exp	enses
4. The rental or home ownership expenses for your residence. Include first mortga payments and any rent for the ground or lot.	ige 4.	\$	650.00
If not included in line 4:			
4a. Real estate taxes	4a.	\$	0.00
4b. Property, homeowner's, or renter's insurance	4b.	\$	12.00
4c. Home maintenance, repair, and upkeep expenses	4c.	·	20.00
4d. Homeowner's association or condominium dues5. Additional mortgage payments for your residence, such as home equity loans	4d. 5.		0.00

ebtor 1 M	ichael C Sto	rm	Case nun	nber (if known)	
Utilities	ı				
	ectricity, heat,	natural das	6a.	. \$	220.00
	-	arbage collection	6b.		0.00
		phone, Internet, satellite, and cable services	6c.	· : ———	335.00
	ther. Specify:	shorte, internet, satellite, and sable services	6d.	· · · · · · · · · · · · · · · · · · ·	0.00
	id housekeep	ing augustica		· 	
	•	•	7.	· ·	450.00
		n's education costs	8.	·	0.00
		d dry cleaning	9.	· 	100.00
		ets and services	10.	· ·	75.00
	and dental ex	•	11.	. \$	20.00
		de gas, maintenance, bus or train fare.		•	225.00
	nclude car pay		12.	· ·	325.00
Entertai	nment, clubs	, recreation, newspapers, magazines, and book	s 13.	. \$	100.00
. Charital	ole contribution	ons and religious donations	14.	\$	0.00
. Insuran	ce.				
		ce deducted from your pay or included in lines 4 or	20.		
15a. Li	e insurance	•	15a.	. \$	0.00
15b. H	ealth insurance		15b.	\$	0.00
15c. V	ehicle insuranc	e	15c.	\$	150.00
	her insurance		15d.	\$	0.00
		taxes deducted from your pay or included in lines		· -	0.00
Specify:	o not morade	taxes deducted from your pay or moldaed in lines -	16.	. \$	0.00
. Installm	ent or lease p	payments:		·	
17a. C	ar payments fo	r Vehicle 1	17a.	. \$	426.00
17b. C	ar payments fo	r Vehicle 2	17b.	\$	0.00
17c. O	her. Specify:	Visions-secured card	17c.	. \$	30.00
	her. Specify:		17d.	\$	0.00
. Your pa	yments of ali	mony, maintenance, and support that you did n		· -	
deducte	d from your p	pay on line 5, Schedule I, Your Income (Official I	Form 106I). 18.	· ·	0.00
. Other p	ayments you	make to support others who do not live with yo	u.	\$	0.00
Specify:			19.		
Other re	al property e	xpenses not included in lines 4 or 5 of this form	or on Schedule I: Y	our Income.	
20a. M	ortgages on ot	her property	20a.	. \$	0.00
20b. R	eal estate taxe	S	20b.	\$	0.00
20c. Pi	operty, home	wner's, or renter's insurance	20c.	\$	0.00
		pair, and upkeep expenses	20d.	\$	0.00
		ssociation or condominium dues	20e.	·	0.00
				· -	
Other: S	pecily: Per	expenses		. +\$	150.00
	e your month	•			
22a. Add	d lines 4 throug	gh 21.		\$	3,063.00
22b. Co	y line 22 (moi	nthly expenses for Debtor 2), if any, from Official Fo	rm 106J-2	\$	
22c. Add	l line 22a and	22b. The result is your monthly expenses.		\$	3,063.00
		ily net income.			-
	•	ur combined monthly income) from Schedule I.	23a.	¢	2 002 42
		- · · · · · · · · · · · · · · · · · · ·		·	3,063.13
23b. C	opy your mont	nly expenses from line 22c above.	23b.	-\$	3,063.00
23c. Si	ubtract vour me	onthly expenses from your monthly income.			
		r monthly net income.	23c.	\$	0.13
For exam modificati	ple, do you expe	rease or decrease in your expenses within the year or do your car loan within the year or do you mortgage?			e or decrease because of
■ No.					
☐ Yes.	Expl	ain here:			

Debtor 1 Michael C Storm	Fill in this informa	ation to identify your o	ase:									
Debtor 2 Spouse f, filling First Name Middle Name Last Name Last Name	Debtor 1 Michael C Storm											
United States Bankruptcy Court for the: WESTERN DISTRICT OF NEW YORK Case number (If known) Official Form 106Dec Declaration About an Individual Debtor's Schedules 12/15 If two married people are filling together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X /s/ Michael C Storm Signature of Debtor 2 Signature of Debtor 2		First Name	Middle Name	Last Name								
Case number ((I known)) Official Form 106Dec Declaration About an Individual Debtor's Schedules 12/15 If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X /s/ Michael C Storm Signature of Debtor 1		First Name	Middle Name	Last Name								
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Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X /s/ Michael C Storm Michael C Storm Signature of Debtor 1 Declaration, and Signature (Official Form 119) X Signature of Debtor 2	■ No											
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that they are true and correct. X /s/ Michael C Storm Michael C Storm Signature of Debtor 1 X Signature of Debtor 2												
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Michael C Storm Signature of Debtor 2 Signature of Debtor 1				,		_						
Michael C Storm Signature of Debtor 2 Signature of Debtor 1	X /s/ Micha	ael C Storm		X								
					ebtor 2							
	Signature	of Debtor 1		Č								
Date March 9, 2020 Date	Date Ma	arch 9, 2020		Date								

	liu this inform	unation to inlandif					
		nation to identify you					
De	ebtor 1	Michael C Storn First Name	1 Middle Name		Last Name		
1 -	btor 2						
(Sp	ouse if, filing)	First Name	Middle Name		Last Name		
Un	ited States Bar	nkruptcy Court for the:	WESTERN DISTRICT C	OF NE	EW YORK		
1	nse number					_	Check if this is an amended filing
St		of Financial	Affairs for Indivi				4/1:
info	ormation. If m		, attach a separate sheet to			equally responsible for su , additional pages, write yo	
Pa	rt 1: Give D	Details About Your Ma	arital Status and Where Yo	u Liv	ved Before		
1.	What is you	r current marital stat	us?				
	☐ Married						
	■ Not mar	ried					
2.	During the la	ast 3 vears. have vou	lived anywhere other than	n whe	ere vou live now?		
	_	, , ,			,		
	□ No	4 all af the places	lived in the least 2 vector. De-		alvala valana vari Eva anav		
	■ Yes. Lis	it all of the places you	lived in the last 3 years. Do r	not in	iciude where you live now		
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	1	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
	1107 Mapl Elmira, NY		From-To: 12/17-4/19		☐ Same as Debtor ²		☐ Same as Debtor 1 From-To:
	205 4th St Horsehead	reet ds, NY 14845	From-To: 10/16-12/17		☐ Same as Debtor ²	ı	☐ Same as Debtor 1 From-To:
3. stat						ity property state or territo co, Texas, Washington and	
	■ No						
	☐ Yes. Ma	ake sure you fill out Sc	hedule H: Your Codebtors (C	Officia	al Form 106H).		
Pa	rt 2 Explai	n the Sources of You	ır Income				
4.	Fill in the tota	al amount of income yo	mployment or from operation or received from all jobs and have income that you receive	l all b	usinesses, including part-		endar years?
	□ No						
	_	l in the details.					
			Debtor 1			Debtor 2	
			Sources of income		Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Deb	otor 1 Mi	chael C S	torm			C:	ase number (if known)		
				Debtor 1			Debtor 2		
				Sources of inco Check all that ap	ply.	Gross income (before deductions and exclusions)	Sources of inc		Gross income (before deductions and exclusions)
		/ 1 of curre filed for bar	nt year until nkruptcy:	■ Wages, common bonuses, tips	nissions,	\$8,711.00		nmissions,	
				☐ Operating a b	usiness		☐ Operating a	business	
	last calen nuary 1 to	dar year: December	31, 2019)	■ Wages, common bonuses, tips	nissions,	\$56,933.00	D □ Wages, combonuses, tips	nmissions,	
				Operating a b	usiness		☐ Operating a	business	
		dar year be December		■ Wages, common bonuses, tips	nissions,	\$49,195.00	D □ Wages, combonuses, tips	nmissions,	
				☐ Operating a b	usiness		☐ Operating a	business	
	■ No	source and f		Debtor 1 Sources of incol Describe below.	me	Gross income from each source (before deductions and	Debtor 2 Sources of inc Describe below	come	Gross income (before deductions and exclusions)
						exclusions)			and exclusions)
Par	t 3: List	Certain Pa	yments You	Made Before You	Filed for Bar	nkruptcy			
6.	Are eithe ☐ No.	Neither D	ebtor 1 nor D	s debts primarily bebtor 2 has prima personal, family, c	rily consume	er debts. Consumer de	bts are defined in 11	U.S.C. § 10	1(8) as "incurred by an
		•	•	•	kruptcy, did y	ou pay any creditor a to	otal of \$6,825* or mo	re?	
		□ No. □ Yes * Subject	paid that cre not include	each creditor to who editor. Do not inclu payments to an att	de payments to orney for this	total of \$6,825* or mor for domestic support ob bankruptcy case. fter that for cases filed o	oligations, such as cl	nild support a	and alimony. Also, do
	Yes.			r both have prima re you filed for ban		er debts. ou pay any creditor a to	otal of \$600 or more	?	
		■ No.	Go to line 7						
		□ Yes	include pay		support oblig	total of \$600 or more a ations, such as child su			t creditor. Do not include payments to an
	Creditor'	s Name and	d Address	Dates	of payment	Total amount paid	Amount you still owe	Was this	payment for

7.	Within 1 year before you filed for bankrupto Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 11 alimony.	tners; relatives of any gene control, or owner of 20% or	eral partners; partners more of their voting	rships of which y securities; and a	ou are a genera any managing a	al partner; corporations agent, including one for
	■ No□ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cosi		nents or transfer a	ny property on a	account of a de	ebt that benefited an
	No					
	☐ Yes. List all payments to an insider Insider's Name and Address	Dates of payment	Total amount	Amount you		this payment
			paid	still owe	Include cred	litor's name
Par	t 4: Identify Legal Actions, Repossession	s, and Foreclosures				
9.	Within 1 year before you filed for bankrupto List all such matters, including personal injury modifications, and contract disputes. No					
	Yes. Fill in the details.	National of the same	0		01-1	
	Case title Case number	Nature of the case	Court or agency		Status of th	ie case
	Credit Acceptance Corp. v. Michael Storm CV-0576-19?EL	collection	Elmira City Cou 317 E. Church S Elmira, NY 1490	Street	☐ Pending ☐ On appe ☐ Conclud	eal
					judgment	
	Guthrie Corning Hospital v. Michael Storm CV-000362-19	collection	Corning City Co 500 Nasser Civi Corning, NY 14	c Center	☐ Pending ☐ On appe ☐ Conclud	eal
					judgment	
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below		rty repossessed, fo	oreclosed, garni	shed, attached	d, seized, or levied?
	No. Go to line 11.Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property		Date		Value of the
		Explain what happened				property
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment beca ■ No □ Yes. Fill in the details.		uding a bank or fin	ancial institutio	n, set off any a	amounts from your
	Creditor Name and Address	Describe the action the	creditor took		action was	Amount
				take	n	

Debtor 1 Michael C Storm

12.	Within 1 year before you filed for bankry court-appointed receiver, a custodian, or		as any of your property in the possession of an a er official?	assignee for the bene	efit of creditors, a
	■ No □ Yes				
Pai	t 5: List Certain Gifts and Contribution	ns			
13.	Within 2 years before you filed for bank No Yes. Fill in the details for each gift. Gifts with a total value of more than \$6	• • •	did you give any gifts with a total value of more to	han \$600 per person [*] Dates you gave	? Value
	per person Person to Whom You Gave the Gift and Address:	i		the gifts	
14.			did you give any gifts or contributions with a tota	al value of more than	\$600 to any charity?
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Coo		Describe what you contributed	Dates you contributed	Value
Pai	t 6: List Certain Losses				
15.	Within 1 year before you filed for bankri or gambling?	uptcy or	since you filed for bankruptcy, did you lose any	thing because of thef	t, fire, other disaster,
	■ No				
	☐ Yes. Fill in the details.				
	Describe the property you lost and how the loss occurred	Include	be any insurance coverage for the loss the amount that insurance has paid. List pending nce claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfer				
	Within 1 year before you filed for bankru consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition	ıptcy, di preparir	d you or anyone else acting on your behalf pay on g a bankruptcy petition? s, or credit counseling agencies for services required		rty to anyone you
	NoYes. Fill in the details.				
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not	You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Cooper, Pautz, Weiermiller & Daub LL 2854 Westinghouse Road Horseheads, NY 14845 mweiermiller@cpwdlaw.com		Attorney Fees and disbursements	1/22/2020	\$1,985.00

Debtor 1 Michael C Storm

Debtor 1 Michael C Storm Case number (if known)

17.	Within 1 year before you filed for bankruptcy promised to help you deal with your creditor Do not include any payment or transfer that you No	s or to make payments			transfer any proper	ty to anyone who
	☐ Yes. Fill in the details.					
	Person Who Was Paid Address	Description and v	alue of any prope	erty	Date payment or transfer was	Amount of payment
					made	1.7
	Within 2 years before you filed for bankrupto transferred in the ordinary course of your bu Include both outright transfers and transfers mainclude gifts and transfers that you have already	usiness or financial affa de as security (such as t	iirs? he granting of a se			
	Yes. Fill in the details.					
	Person Who Received Transfer Address	Description and v property transferr			ny property or received or debts hange	Date transfer was made
	Person's relationship to you					
19.	Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-prof		y property to a se	elf-settled trus	st or similar device o	of which you are a
	■ No					
	Yes. Fill in the details.					
	Name of trust	Description and v	alue of the prope	rty transferre	d	Date Transfer was made
Par	8: List of Certain Financial Accounts, Ins	truments, Safe Deposit	Boxes, and Stora	age Units		
	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, assoc	r other financial accour	nts; certificates of	·	•	, ,
	No	iations, and other inian	iciai ilistitutions.			
	Yes. Fill in the details.					
	Name of Financial Institution and	Last 4 digits of	Type of account	t or Date	e account was	Last balance
	Address (Number, Street, City, State and ZIP Code)	account number	instrument	clos	sed, sold, red, or sferred	before closing or transfer
21.	Do you now have, or did you have within 1 yocash, or other valuables?	ear before you filed for	bankruptcy, any	safe deposit	box or other deposit	tory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, State and ZIP Code)		escribe the c	ontents	Do you still have it?
22.	Have you stored property in a storage unit o	r place other than your	home within 1 ye	ear before you	ı filed for bankruptc	y?
	■ No					
	Yes. Fill in the details.					
	Name of Storage Facility	Who else has or h	ad access D	escribe the c	ontents	Do you still
	Address (Number, Street, City, State and ZIP Code)	to it? Address (Number, State and ZIP Code)				have it?

Debtor 1 Michael C Storm Case number (if known)

Pai	t 9: Identify Property You Hold or Control for S	Someone Else		
23.	Do you hold or control any property that someo for someone.	ne else owns? Include any prope	rty you borrowed from, are storing fo	r, or hold in trust
	No			
	Yes. Fill in the details.			
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
Pai	t 10: Give Details About Environmental Informa	ation		
For	the purpose of Part 10, the following definitions	apply:		
	Environmental law means any federal, state, or toxic substances, wastes, or material into the ai regulations controlling the cleanup of these substances.	r, land, soil, surface water, ground	— ·	
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	•	law, whether you now own, operate,	or utilize it or used
	Hazardous material means anything an environment hazardous material, pollutant, contaminant, or s		s waste, hazardous substance, toxic	substance,
Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of whe	n they occurred.	
24.	Has any governmental unit notified you that you	ı may be liable or potentially liable	e under or in violation of an environm	ental law?
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	release of hazardous material?		
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or adminis	strative proceeding under any env	ironmental law? Include settlements	and orders.
	No			
	Yes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Pai	t 11: Give Details About Your Business or Con	nections to Any Business		
27.		-	ny of the following connections to an	v husiness?
21.	☐ A sole proprietor or self-employed in a t	•		y business:
	☐ A member of a limited liability company		•	
	☐ A partner in a partnership	(,	··r \ /	
	☐ An officer, director, or managing execut	ive of a corporation		
	☐ An owner of at least 5% of the voting or	-		

Official Form 107

	■ No. None of the above applies. Go to	Part 12.				
	lacksquare Yes. Check all that apply above and fil	I in the details below for each business.				
	Business Name Address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.			
	(Number, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	ŕ			
			Dates business existed			
28.	Within 2 years before you filed for bankrup institutions, creditors, or other parties.	tcy, did you give a financial statement to an	nyone about your business? Include all financial			
	■ No					
	☐ Yes. Fill in the details below.					
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued				
Por	Part 12: Sign Below					
rai	Olgii Doloii					
I hav	ve read the answers on this Statement of Fire	false statement, concealing property, or ol	declare under penalty of perjury that the answers btaining money or property by fraud in connection irs, or both.			
I havare to with 18 U	ve read the answers on this Statement of Figure and correct. I understand that making a a bankruptcy case can result in fines up to I.S.C. §§ 152, 1341, 1519, and 3571. Michael C Storm	false statement, concealing property, or ol \$250,000, or imprisonment for up to 20 year	btaining money or property by fraud in connection			
I have are to with 18 U	ve read the answers on this <i>Statement of Fi</i> true and correct. I understand that making a a bankruptcy case can result in fines up to I.S.C. §§ 152, 1341, 1519, and 3571.	false statement, concealing property, or ol	btaining money or property by fraud in connection			
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Debtor 1 Michael C Storm

Fill in this infor	mation to identify your o	ase:			
Debtor 1	Michael C Storm				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	WESTERN DISTR	RICT OF NEW YORK		
Case number (if known)				ı	☐ Check if this is an amended filing
Official Fo		n for Indiv	iduals Filing Under	Chapter 7	12/15
•	ividual filing under chap e claims secured by you	. •	out this form if:		
you have least	sed personal property a is form with the court w ever is earlier, unless th	nd the lease has no thin 30 days after	ot expired. you file your bankruptcy petition or b e time for cause. You must also send	y the date set for the copies to the credit	e meeting of creditors, ors and lessors you list
	eople are filing together nd date the form.	in a joint case, bo	th are equally responsible for supplyi	ng correct informati	on. Both debtors must
	and accurate as possible our name and case nun		needed, attach a separate sheet to the	nis form. On the top	of any additional pages,
Part 1: List Y	our Creditors Who Have	Secured Claims			
			: Creditors Who Have Claims Secured	hy Property (Offici	al Form 106D) fill in the
information be	elow.				
identify the cr	editor and the property th	iat is collateral	What do you intend to do with the p secures a debt?		id you claim the property s exempt on Schedule C?
Creditor's V	isions FCU		☐ Surrender the property.		□ No
name:			Retain the property and redeem it		_
Description of	Checking: Visions	FCU	Retain the property and enter into a Reaffirmation Agreement.	a	Yes
property	_		Retain the property and [explain]:		
securing debt	:		Retain, keep current		
	our Unexpired Personal				
in the information	on below. Do not list rea	l estate leases. Un	in Schedule G: Executory Contracts a expired leases are leases that are still he trustee does not assume it. 11 U.S	I in effect; the lease	es (Official Form 106G), fill period has not yet ended.
Describe your u	unexpired personal prop	erty leases		Will th	e lease be assumed?
Lessor's name:	acad			□ No	
Description of lea Property:	asca			☐ Ye	s
Lessor's name: Description of le	ased			□ No	,
Property:	ascu			☐ Ye	s
Lessor's name:				□ No	
Official Form 108		Statement of In	tention for Individuals Filing Under C	hapter 7	page 1

Debtor 1 Michael C Storm	Case number (if known)
Description of Leave d	
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Lessor's name:	□ No
Description of leased Property:	☐ Yes
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indicated my intention about any property that is subject to an unexpired lease.	property of my estate that secures a debt and any personal
X /s/ Michael C Storm X	
Michael C Storm Signature of Debtor 1	ature of Debtor 2
Date March 9, 2020 Date	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation	
\$245	filing fee	
\$75	administrative fee	
+ \$15	trustee surcharge	
\$335	total fee	

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Western District of New York

In re	e Michael C Storm		Case No.					
		Debtor(s)	Chapter	7				
	DISCLOSURE OF CO	MPENSATION OF ATTORN	NEY FOR DI	EBTOR(S)				
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:							
	For legal services, I have agreed to accept		\$	1,600.00				
	Prior to the filing of this statement I have re	ceived	\$	1,600.00				
	Balance Due			0.00				
2.	The source of the compensation paid to me was:							
	■ Debtor □ Other (specify):							
3.	The source of compensation to be paid to me is:							
	■ Debtor □ Other (specify):							
4.	■ I have not agreed to share the above-disclose	ed compensation with any other person un	less they are mem	bers and associates	of my law firm.			
	☐ I have agreed to share the above-disclosed cocopy of the agreement, together with a list of				law firm. A			
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:							
	 a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] 							
6.	By agreement with the debtor(s), the above-disclescent Representation of the debtors in a proceeding.	losed fee does not include the following se any dischargeability actions, relief		ns or any other a	dversary			
		CERTIFICATION						
	I certify that the foregoing is a complete statement bankruptcy proceeding.	nt of any agreement or arrangement for pa	ayment to me for r	epresentation of the	debtor(s) in			
N	March 9, 2020	/s/ Mark A. Weiermi	iller, Esq.					
Date			Mark A. Weiermiller, Esq.					
		Signature of Attorney Cooper, Pautz, Wei	ermiller & Daub	ner. LLP				
		2854 Westinghouse	Road	,				
		Horseheads, NY 14						
		607-739-8763 Fax: mweiermiller@cpw						
		Name of law firm						

United States Bankruptcy Court Western District of New York

In re	Michael C Storm		Case No.						
		Debtor(s)	Chapter	7					
VERIFICATION OF CREDITOR MATRIX									
The ab	ove-named Debtor hereby verific	es that the attached list of creditors is true and co	orrect to the best	of his/her knowledge.					
Date:	March 9, 2020	/s/ Michael C Storm							
		Michael C Storm							
		Signature of Debtor							

Arnot Medical Services PC 600 Ivy Street Elmira, NY 14905

AT&T Mobility P.O. Box 636216 Atlanta, GA 30353-6216

Capital One P.O. Box 6492 Carol Stream, IL 60197

Chad Hammond, Esq. 88 E. Tioga Avenue Corning, NY 14830

Charter Communications 400 Atlantic St. Stamford, CT 06901

Credit Acceptance Corp. 25505 W. 12 Mile Road Southfield, MI 48034

Credit One Bank
P.O. Box 60500
City of Industry, CA 91716-0500

Empower Federal Credit Union 1 Member Way Syracuse, NY 13212

Enhanced Recovery Company P.O. Box 57547 Jacksonville, FL 32241

Guthrie Corning Hospital 1 Guthrie Drive Corning, NY 14830-3696

Indigo-Celtic Bank P.O. Box 4499 Beaverton, OR 97076 Internal Revenue Service P.O. Box 7346 Philadelphia, PA 19101-7346

Jefferson Capital Systems 16 McCleland Road Saint Cloud, MN 56303

Merrick Bank P.O. Box 30537 Tampa, FL 33630-3537

NYSEG Attn: Bkpt. Dept. POB 5240 Binghamton, NY 13902-5240

Performant Recovery, Inc. P.O. Box 9056 Pleasanton, CA 94566

Progressive Leasing 256 West Data Drive Draper, UT 84020

RR Resource Recovery LLC 88 Tioga Ave. Suite 201 Corning, NY 14830

ServU FCU 9823 Science Center Dr. Painted Post, NY 14870

Solomon & Solomon, PC P.O. Box 15019 Albany, NY 12212-5019

Southport Dental 1141 Broadway Elmira, NY 14904

St. Joseph's Hospital 555 E. Market St. Elmira, NY 14901 Stephen Einstein & Associates 39 Broadway, Room 1250 New York, NY 10006

STHCC 225 W. Water St. Elmira, NY 14901

The CBE Group, Inc. P.O. Box 2594 Waterloo, IA 50704

Uown Leasing 10500 University Center Drive Tampa, FL 33612

Uplift 801 El Camino Real Menlo Park, CA 94025

US Attorney's Office 100 State St., Room 6200 Rochester, NY 14614

Visions FCU 24 McKinley Ave. Endicott, NY 13760-5491